

PTO/SB/81 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control numb

## POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

Application Number	10/594,262
Filing Date	September 25, 2006
First Named Inventor	Wolfgang Hillen
Title	Peptidn-Based Method For Monitoring Gene Expression in A Host Cell
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	06-40247-US

I hereby revoke all previous powers of attorney given in the above-identified application.					
I hereby appoint:					
Practitioners associated with the Customer Number:  OR		070	066		
Practitioner(s) named below:					
Name	T	• • • • • • • • • • • • • • • • • • • •	Registrati	on Number	
		··			
		-			
		<del></del>			
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	in identified above	, and to t	ransact all busine	iss in the U	Inited States Patent and
Places requires or shares the second of the					······································
Please recognize or change the correspondence address fo	r the above-identi	ned appli	cation to:		
The address associated with the above-mentioned	Customer Number	er:			
OR				]	
The address associated with Customer Number:					
OR					
Firm or Individual Name					-
Address				· · · · · · · · · · · · · · · · · · ·	
City		State		T	Zip
Country			<u> </u>		
Telephone		Email			
lam the:					
Applicant/Inventor.					
Assignee of record of the entire interest. See 37 CFR 3.71.  Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)					
SIGNATURE of Applicant or Assignee of Record					
Signature / Warms / Kapali	l			Date	3-14 5 KG 07
	Marcus Klotzsche		7	elephone	USA-212-7464139
Title and Company					
NOTE: Signatures of all the Inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.					
•Total of 3 forms are submitted.					

X

This collection of information is required by 37 CFR i.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



PTO/SB/81 (01-06)
Approved for use through 12/31/2008. OMB 0651-0035
U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE
to a collection of information unless it displays a valid OMB control unpher

Under the Paperwork Reduction Act of 1995, no persons are r		ormation unless it displays a valid OMB control number.
POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM	Application Number	10/594,262
	Filing Date	September 25, 2006
	First Named Inventor	Wolfgang Hillen
	Title	Paptide-Based Method For Monitoring Gene Expression in A Host Cell
	Art Unit	Not Yet Assigned
	Examiner Name	Not Yet Assigned
	Attorney Docket Number	06-40247-US

I hereby revoke all previous powers of attorney given in the above-identified application.				
	lous powers of attorney given in t	ne above-identified ap	plication.	
I hereby appoint:	<u> </u>			
1	d with the Customer Number:			
OR	<b>L</b>			
Practitioner(s) named t	pelow:			
	Name Registration Number			
as my/our attorney(s) or agen	it(s) to prosecute the application identified	ahove, and to transact all b	usiness in the United States Patent and	
Trademark Office connected	therewith.	- and to transact and	assures in the stated clates i steat and	
Please recognize or change t	he correspondence address for the above	e-identified application to:		
			. '	
OR	ated with the above-mentioned Customer	Number:		
	·			
The address associated with Customer Number:				
OR Firm or				
Individual Name				
Address				
City		State	Zip	
Country Telephone		Email		
I am the:		Cilidii		
Applicant/Inventor.				
	Alba anticolorista del Cara CT CTC CTA			
Statement under 37	of the entire interest. See 37 CFR 3.71. CFR 3.73(b) is enclosed. (Form PTO/SB	/96)		
SIGNATURE of Applicant or Assignee of Record				
Signature	Dankers		Date 3/7/07	
Name Christi	an Berens		Telephone + 4991318528084	
Title and Company				
NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
*Total of 3 forms are submitted.				
This collection of information is required by 37 CER 131 132 and 133. The information is required to obtain as reading a heaville which is to file found				

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.



Alle X

PTO/SB/81 (01-06) Approved for use through 12/31/2008. OMB 0651-0035

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

## POWER OF ATTORNEY and CORRESPONDENCE ADDRESS INDICATION FORM

red to respond to a collection of init	ormation unless it displays a valid OMB control number.
Application Number	10/594,262
Filing Date	September 25, 2006
First Named Inventor	Wolfgang Hillen
Title	Peptide-Based Mathod For Monitoring Gana Expression in A Host Cell
Art Unit	Not Yet Assigned
Examiner Name	Not Yet Assigned
Attorney Docket Number	06-40247-US

I hereby revoke all previous powers of attorney given in the above-identified application.				
I hereby appoint:		1		
Practitioners associated with the Customer Number:	07066			
OR .				
Practitioner(s) named below:				
Name	Regis	tration Number		
		•		
as my/our attorney(s) or agent(s) to prosecute the application Trademark Office connected therewith.	identified above, and to transact all bu	siness in the United States Patent and		
Trademark Office confected therewith.				
Please recognize or change the correspondence address for	the above-identified application to:			
The address associated with the above-mentioned C	Customer Number:			
OR		<del></del> ]		
<u> </u>				
The address associated with Customer Number:  OR				
Firm or				
Individual Name Address		·		
. Address				
City	Librata	[7]]		
Country	State	Zip		
Telephone	Email			
I am the:				
Applicant/Inventor.				
	2.2.4			
Assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96)				
SIGNATURE of Applicant or Assignee of Record				
Signature Old Gy Mills		Date 07-03-2007		
TVONGATION .		Telephone		
Title and Company				
NOTE. Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.				
*Total of 3forms are submitted.				

This collection of information is required by 37 CFR 1.31, 1.32 and 1.33. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U S.C. 122 and 37 CFR 1.11 and 1.14. This collection is estimated to take 3 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.